

## Surplus Funds from Abandoned Vehicle Auction Request

You must be the registered owner when the vehicle was auctioned to claim surplus funds. The registered owner must make the claim within one year from the auction date.

### Registered Owner Information

Full name: \_\_\_\_\_ Daytime Phone No: (\_\_\_\_) \_\_\_\_\_

Mailing address: \_\_\_\_\_

Street / PO Box

City

State

Zip

### Vehicle Information

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_

Plate Number \_\_\_\_\_ Vehicle Identification Number VIN (if known) \_\_\_\_\_

Was the vehicle registered in Washington? \_\_\_\_\_ If no, where? \_\_\_\_\_

Vehicle impounded by \_\_\_\_\_

Impound date \_\_\_\_\_ Auction date \_\_\_\_\_

I request release of any surplus funds for the above vehicle. **X** \_\_\_\_\_  
Signature

### This form must be notarized

NOTARY SEAL OR STAMP	NOTARIZATION / CERTIFICATION
	<p>State of <input type="checkbox"/> Washington <input type="checkbox"/> Other _____ <small>State where this document is being notarized</small></p> <p>County of _____ Signed or attested before me on _____</p> <p>by _____ Signature _____ <small>Printed Name of Person Signing Document Notary / Agent Signature</small></p> <p>Notary's Name (<b>PRINTED or STAMPED</b>) _____</p> <p>Title _____ <b>AND:</b> Dealer No. <b>OR</b> County / Office No. <b>OR</b> Notary Expiration Date _____ <small>Notary / Agent</small></p>

WAC 308-61-190(2)(b)